

CITY OF TEMPLE PUBLIC RECORDS REQUEST

ALL REQUESTS MUST BE IN WRITING AND DIRECTED TO THE CITY SECRETARY'S OFFICE BY E-MAIL TO <u>salexander@templetx.gov</u>; OR FAX TO 254-298-5637; OR BY MAIL TO P. O. BOX 207, TEMPLE, TX 76503.

NAME OF REQUESTER:
MAILING ADDRESS:
TELEPHONE AND/OR FAX NO.:
E-MAIL ADDRESS:
SIGNATURE OF REQUESTER: DATE:
Pursuant to the Public Information Act, Texas Government Code, Section 552, I hereby request the following information currently existing in the records of the City of Temple, Texas:
List information as specifically as possible, including names, dates and case numbers, if known. Attach a separate sheet to this form if necessary. **If requesting an ACCIDENT/CRASH Report, please complete page 2 of this request form.
(Check one) AI request copies (charged per TBPC guidelines) BI request only to view records at City Hall COther (please explain)
In making this request, I understand the City is under no obligation to create a document to satisfy my request or to comply with a standing request for information. I further understand that the information will be released only in accordance with the Public Information Act, which may require a determination as to confidentiality by the Texas Attorney General prior to release. I further understand the information will be promptly released or the requestor will be notified in writing within 10 days after the request is submitted.
City Use Only:
Date received:Employee receiving information:
Date/Dept. forwarded to, if applicable:
Date released: Amount charged:
Miscellaneous comments/instructions:



ACCIDENT REPORT REQUEST

The law has recently changed regarding who is authorized to receive an un-redacted accident report.* Authorized individuals are those listed below.

In order for us to better assist you, please indicate whether you are:
A person involved in the accident
The authorized representative of any person involved in the accident
A driver involved in the accident
An employer, parent, or legal guardian of a driver involved in the accident
The owner of a vehicle or property damaged in the accident
A person who has established financial responsibility for a vehicle involved in the accident in a mannerdescribed in Section 601.051, including a policyholder of a motor vehicle liability insurance policy covering the vehicle
An insurance company that issued an insurance policy covering a vehicle involved in the accident
An insurance company that issued an insurance policy covering any person involved in the accident
A person under contract to provide claims or underwriting information to a person
A radio or television station that holds a license issued by the Federal Communications Commission
A newspaper that is a free newspaper of general circulation or qualified under Section 2051.044, Government Code, to publish legal notices, published at least once a week, and available and of interest to the general publi in connection with the dissemination of news
A person who may sue because of death resulting from the accident
In addition, please provide photo identification along with any supporting documentation. By signing below you are verifying and affirming that you are one of the persons or entities listed above and are authorized by law to receive an un-redacted copy of the report.
Signature: Date:

*In the 84th R legislative session (2015), Texas Transportation Code § 550.065 was amended by the passage of HB 2633. Previously, the law stated that a governmental entity should release an accident report to anyone that could provide two or more of the following:

1) the date of the accident, 2) the specific address of the highway or street where the accident occurred; or 3) the name of any person involved in the accident. HB 2633, however, amended § 550.065 prohibiting governmental entities from releasing motor vehicle accident reports to persons with no connection to the accident, and provided the list of authorized individuals as shown above.